DE ARATION and POWER OF ATTOR

As a below-hanted inventor, I hereby declare inat:							
My residence, post office address and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (if only one mane is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is also and for which the name is listed below) or an original, first and joint inventor (if plural names are listed below) or an original, first and joint inventor (if plural names are listed below).							
below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
METHOD FOR LOCALIZATION OF BLOOD CLOTS							
the specification of which is attached hereto unless the following box is checked:							
was filed on as U.S. Application No or PCT International Application No and was amended							
on (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.							
I acknowledge the duty to disclose information which is known to me to be material to patentability as defined in 37 CFR § 1.56.							
I hereby claim foreign priority benefits under 35 U.S.C. & 119(a)-(d) or & 365(b) of any foreign application(s) for nations or inventoring							
certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.							
Application No. Country Filing D							
I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States Provisional Application(s) listed below.							
U.S. Provisional Application No.				U.S. Filing Date			
60/126,359				3/26/99			
I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International Application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT International Application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is known to me to be material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.							
Application No. U.S. Filing Date Status (patented, pending or abandoned)							
POWER OF ATTORNEY: I hereby appoint the following attorney(s) and/or agent(s) the power to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:							
				Registration No.: 34 329			
Gerald J. Boudreaux				54,527			
				35,073			
Karen H. Kondrad				38,212			
Scott K. Larsen				38,532			
Maureen P. O'Brien				42,043			
Norbert Reinert				18,926			
				i ·			
Mary K. VanAtten				39,408			
Kenneth B. Rubin				36,295			
Rosemarie R. Wilk-Orescan				P45,220			
Send correspondence and direct telephone calls to: DuPont Pharmaceutica telephone calls to:					Tel. No.		
C/O E. I.				de Nemours and Co. (302) 992-4528			
1007 Ma			Patents irket Street	eet			
Wilmington, DE 19898, U.S.A. Liberary declare that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements made harain of my own knowledge are true and that all statements my own knowledge are true and that all statements my own knowledge are true and the statement my own knowledge are true and th							
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.							
INVENTOR(S)							
Full Name	Last Name		First Name	,	Middle Name		
	of Inventor LAZEWATSKY			JOEL			
Signature (please sign full name): Date:							
Residence &	City State or Foreign						
Citizenship	AUBURNDALE		MASSACHUSETTS		US		
Post Office Address	Post Office Address 32 WOODLAND RD.		City		State or Country	Zip Code	
			AŬBURNDALE		MASSACHUSETTS	02466	
Full Name Last Name Fi			First Name	Middle Name			
Signature (please sign full name):					Date:		
Residence &	City		State or Foreign Country		Country of Citizenship		
Citizenship Post Office	Post Office Address		City		St	(a. 6 ·	
Address	rost Office Address		City		State or Country	Zip Code	
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Additional Inventors are being named on separately numbered sheets attached hereto.